P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 879-235P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the inventor entitled:

Insert Title:	CAMERA WITH	TOUCHSCREEN		\(\rac{1}{2}\rac	100 m				
				AUG 3 0	1999 <u>ප</u>				
Fill in Appropriate Information — For Use Without	United States Applicat	iled on <u>June 3, 199</u> ion Number <u>09/324</u> ,	, / /8	PATENTE TH	ADEMAR'S as	<u>,</u>			
Specification Attached:	and amended on								
		l on			as PCT ; and was				
	International Application Numberamended under PCT Article 19 on				-				
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as								
	amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.								
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.								
	I hereby claim foreign priority inventor's certificate listed below a filing date before that of the application.		foreign application for pa	ny foreign applic tent or inventor?	ation(s) for s certificate	patent or having a			
Insert Priority	Prior Foreign Application	(s)			Priority (Claimed			
Information: (if appropriate)	No.10-157481	Japan	June 5, 1		X				
	(Number)	(Country)	(Month / Day / Ye		Ye s □	No			
	(Number)	(Country)	(Month / Day / Ye		Yes	No			
	(Number)	(Country)	(Month / Day / Ye		Yes	No			
	(Number)	(Country)	(Month / Day / Ye	ar Filed)	Yes	No			
Insert Provisional Application(s): → (if any)	I hereby claim the benefit under Titl	e 35, United States Code, §119(e) (Application Number)	of any United States provi		n(s) listed be	ow.			
	(Application Number)								
	(Application Number) (Filing Date) All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
Insert Requested Information: (if appropriate)	Country	Application	Number	Date of Filing (Month / Day	/ Year)			
Insert Prior U.S. Application(s):	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:								
(if any)	(Application Number)	(Filing Date		(Status — patented, pe	nding, abandone	d)			
	(Application Number)	(Filing Date	<u> </u>	(Status — patented, pe	ending, abandon	ed)			

Howing attorneys to prosecute this application and international application based on this application I hereby appoint d in connection with the resulting patent based on in the Patent and Trademark Office connected therew and to transact all bu instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
Joseph A. Kolasch	(Reg. No. 22,463)	James M. Slattery	(Reg. No. 28,380)
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PLEASE NOTE: **YOU MUST** COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor:	GIVEN NAME FAMILY NAME		INVENTOR'S SIGNATURE		DATE*			
Insert Name of Inventor	Manabu	HYODO	manalen Toyoo	$\overline{\omega}_{\underline{}}$	06/28/1999			
Insert Date This Document is Signed	Residence (City, State & Cou	ntry)	- d	CITIZENSHIP				
Insert Residence Insert Citizenship		, Saitama, Jar						
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
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Full Name of Second Inventor, if any: see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Cou	ntry)		CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
					Thirt			
Full Name of Third Inventor, if any see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Cou	ntry)		CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Full Name of Fourth Inventor, if any see above	GIVEN NAME	PANILT NAME	INVERTOR 3 SIGNATURE		DATE			
	Residence (City, State & Cou	ntry)		CITIZENSHIP				
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
					l natra			
Full Name of Fifth Inventor, if any see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Cou	intry)		CITIZENSHIP	•			
	POST OFFICE ADDRESS (Complete Street Address including City, State & Country)							
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